



June 28, 2012

Marlene H. Dortch
Office of the Secretary
Federal Communications Commission
445 12th Street SW
Washington, D.C. 20554

RE: WC Docket No. 10-90, *In the Matter of Connect America Fund; Annual Reporting Requirements for High-Cost Recipients*, 47 CFR §54.313(a)(2)-(6) and (h)

Dear Ms. Dortch:

Enclosed please find the Eligible Telecommunications Carrier (ETC) annual report and certifications for Wamego Telecommunications Co., Inc., Study Area Code 411845. This information is being provided pursuant to 47 CFR §54.313(a)(2)-(6) for 2012, covering 2011 calendar year information.

Also enclosed please find Wamego Telecommunications Co., Inc. Local Rate Floor data as required by 47 CFR §54.313(h), along with the necessary certification signed by a company officer.

This information is being provided to the Administrator and the Kansas Corporation Commission pursuant to 47 CFR §54.313(i).

Please contact the undersigned if there are any questions regarding the enclosed information.

Sincerely,

A handwritten signature in black ink, appearing to read "Rob Strait", is written over a horizontal line.

Rob Strait
Authorized Representative for
Wamego Telecommunications Co., Inc.

Enclosure

cc: Universal Service Administrative Company

File Clerk
Kansas Corporation Commission
1500 SW Arrowhead Road
Topeka, KS 66604

Annual Reporting Requirements pursuant to § 54.313(a)(2)-(6)

WC Docket No. 10-90

§ 54.313(a)(2) – Outage reporting

- ☐ My company was not required to collect this information in 2011.
- ☒ My company collected this information pursuant to state utility commission requirement.
A copy of the report is attached.

§ 54.313(a)(3) – Unfulfilled service requests

- ☒ My company was not required to collect this information in 2011.
- ☐ My company collected this information pursuant to state utility commission requirement.
A copy of the report is attached.

§ 54.313(a)(4) – Customer complaints per 1000 connections

- ☐ My company was not required to collect this information in 2011.
- ☒ My company collected this information pursuant to state utility commission requirement.
A copy of the report is attached.

§ 54.313(a)(5) – Service quality standards and consumer protection rules

I certify that the reporting carrier is in compliance with applicable service quality standards and consumer protection rules.

§ 54.313(a)(6) – Ability to function in emergency situations

I certify that the reporting carrier can function in emergency situations as set forth in 47 CFR §54.202(a)(2). Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.

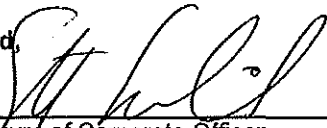
I am authorized to make this certification on behalf of the company named above and, to the best of my knowledge the information reported on this form is accurate. This certification is for the study area(s) listed below. **(Please enter your Company Name, State and Study Area Code)**

Company Name	State	Study Area Code
Wamego Telecommunications Co., Inc.	Kansas	411845

(If necessary, attach a separate list of additional study areas and check this box.)

☐

Signed,



[Signature of Corporate Officer]

Steve Sackrider

[Printed Name of Corporate Officer]

President

[Title of Corporate Officer]

Date:

6/20/12

Carrier's Name Wamego Telecommunications Co., Inc.

Carrier's Address P.O. Box 25, Wamego, KS 66547

Carrier's Telephone Number (785) 456-1000

Attachment 6
May 2012

2. All ETCs must provide detailed information on any outage lasting at least 30 minutes for any facilities that an ETC owns, operates, leases, or otherwise utilizes that potentially affect at least 10% of the end users in a service area, or that could affect 911.

Date of Outage	Time of Outage	Description of the Outage and Resolution	Particular services affected	Geographic Areas Affected	Steps Taken to Prevent Future Recurrences	Number of Customers Affected
NA.						

(If necessary, please provide additional pages.)

3. Please provide the number of complaints per 1,000 connections (fixed or mobile). A complaint is any non-duplicative verbal or written complaint received by the company, FCC, and/or KCC.

Less than 5/1000

Rate Floor Data

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986					
Block 1 - Contact Information					
ROW #	DATA ELEMENT	FORMAT OF REQUESTED DATA	RESPONSE		
1	Carrier Study Area Code	6 numeric digits	411845		
2	Carrier Study Area Name	alpha characters	Wamego Telecommunications Co., Inc.		
3	Service Provider Identification Number	9 numeric digits	143002316		
4	Residential Local Service Charge Effective Date	mm/dd/yyyy	1/1/2012		
5	Contact Name	alpha characters	Steve Sackrider		
6	Contact Telephone Number (include area code)	9 numeric digits	785-456-1000		
7	Sheet number	numeric digit(s)	1		
8	Total Number of Sheets	numeric digit(s)	1		
Block 2 - Residential Local Service Rates, Fees, and Line Counts					
	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops
9	\$ 16.25		\$ 1.45		3562
10					
11					
12					
13					
14					
15					
16					
17					
18					
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20					
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34					

Rate Floor Template

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier **Wamego Telecommunications Co., Inc.**

Signature of authorized officer



Date **06/08/2012**

Printed name of authorized officer

Steve Sackrider

Title or position of authorized officer

President

Telephone number of authorized officer: **(785) 456-1000**, ext.

Study Area Code of Reporting Carrier

411845

Filing Due Date for this form
(mm/dd/yyyy)

7/1/2012



I certify that our company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2012 and has no monthly residential rates (plus charges as defined) less than \$10.

Rate Floor Data

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING RATE FLOOR DATA ON THE CARRIER'S BEHALF:

<p align="center">Certification of Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association (NECA)</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data provided to the authorized agent; and, to the best of my knowledge, the actual rate floor data provided to the authorized agent is accurate.</p> <p>I certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information reported herein based on data provided by the reporting carrier; and to the best of my knowledge the information reported herein is accurate.</p>				
Name of Authorized Agent <u>National Exchange Carrier Association (NECA)</u>				
Name of Reporting Carrier <u>Wamego Telecommunications Co., Inc.</u>				
Signature of authorized officer 				Date <u>06/06/2012</u>
Printed name of authorized officer <u>Steve Sackrider</u>				
Title or position of authorized officer <u>President</u>				
Telephone number of authorized officer: <u>(785) 456-1000</u> ext. _____				
Study Area Code of Reporting Carrier	<u>411845</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>7/1/2012</u>	